ATTACHMENT 1 – EXPERIENCE OF VENDOR {BIDDER}

Emergency Winter Towing 2020

Vendor {Bidder} to complete the following information

Vendor {Bidder} Name: ______

experience.

| Number of Vendor {Bidder} years of experience providing towing services: | | | |
|--|------------------------|----------------|---------------------------|
| Does your company have two (2) or more years of experience towing services on public roadways? | | | |
| If so, please provide the following information*: | | | |
| If so, please provide the fo | ollowing information*: | : | |
| If so, please provide the fo | Length of | Contact Person | Contact Person |
| | | | Contact Person Phone # |
| | Length of | | |

*Vendors {Bidders} are able and encouraged to submit additional attachments detailing relevant